

## CHECK ONE:

- ☐ New Registration  
☐ Quarterly Registration  
☐ Yearly Registration  
☐ Address Change  
☐ Employment Change  
☐ School Change  
☐ Temporary Address

Form 47  
(Revised June 2011)

## Alabama Bureau of Investigation



## Sex Offender Registration Form

Offender Information							
<b>Full Name:</b>	<b>Last</b>	<b>First</b>	<b>Middle</b>	<b>Suffix</b>			
<b>Social Security Number</b>		<b>Birth Date</b>	<b>Place of Birth</b>		<b>Blood Type</b>		
<b>Alternate SSN</b>		<b>Alternate DOB</b>	<b>Home/Cell Phone</b> ( )		<b>Work Phone</b> ( )		
<b>Race</b>	<b>Gender</b>	<b>Hair Color</b>	<b>Eye Color</b>	<b>Height</b>	<b>Weight</b>	<b>Skin Tone</b>	
<b>Nearest Relative:</b>	<b>Name</b>	<b>Phone Number</b>		<b>Relationship</b>			
<b>Aliases/Nicknames/etc:</b>		<b>Registration Status:</b>		( ) Absconded ( ) Unknown		( ) Compliant ( ) Non-compliant	
<b>Address:</b>	Mailing Address						
	Street Address (if different)				Apartment #	Time at this residence	
	City		County		State	Zip Code	
	Are there any minors living at this address? (List names/age/relationship)						
	Previous Address				Apartment #		
	Other residence (if temporary, include date range) Street						
	City		County		State	Zip Code	
<b>Offender:</b>	<b>Checked for warrants: Y ( ) N ( )</b>			<b>Outstanding warrants:</b>	<b>Yes ( ) No ( )</b>		
<b>FBI Number:</b>		<b>SID Number:</b>		<b>AIS Number:</b>			
<b>Any Cautions/Medical Conditions:</b>				<b>Scars/Marks/Tattoos:</b>			
Employment/School Information including day labor, volunteer, unpaid internship, etc.							
<b>Occupation:</b>				<b>Employer:</b>			
Is this employment within 2,000 ft of a school or daycare?				<b>Employer Address:</b>			
<b>Work Location:</b> (If different than employer address)							
<b>School Currently Attending:</b>				<b>School Address:</b>			
Other Identifying Information							
<b>Driver License/State ID numbers (include issuing State)</b>							
<b>Passport, Military ID, Immigration ID, Professional Licenses, etc.</b>							
<b>Internet Identifiers/Addresses (Email, Facebook, MySpace, Instant Messenger, etc.)</b>							
Offense Information							

<b>Offense:</b>				<b>UCR Code:</b>	
<b>Offense Description:</b>					
<b>Date of Arrest</b>	<b>State of Crime</b>	<b>City of Crime</b>	<b>Court Case #</b>	<b>Disposition Date</b>	
<b>Victim Information:</b>	<i>Age</i>	<i>Race/Gender</i>	<i>Relationship</i>		
<b>Weapon Used:</b>	<i>Type</i>		<i>Make</i>	<i>Description</i>	
<b>Court Information:</b> (Check one in each box)	<input type="checkbox"/> Alabama conviction <input type="checkbox"/> Out of State <input type="checkbox"/> Military <input type="checkbox"/> Federal	<input type="checkbox"/> Youthful Offender <input type="checkbox"/> Juvenile <input type="checkbox"/> Adult	<b>Status:</b> <input type="checkbox"/> Probation <input type="checkbox"/> None <input type="checkbox"/> Parole	<b>DNA Available:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Vehicle Information including land, aircraft and watercraft vehicles</b>					
<b>(Personal) Type</b>	<b>Make</b>	<b>Model</b>	<b>Style/Color</b>	<b>Tag # / State</b>	<b>Year</b>
<b>Vehicle Identification #</b>	<b>Address vehicle is kept</b>		<b>Plate Category</b>	<b>Plate Type</b>	<b>Year Expires</b>
<b>(Work/Other) Type</b>	<b>Make</b>	<b>Model</b>	<b>Style/Color</b>	<b>Tag # / State</b>	<b>Year</b>
<b>Vehicle Identification #</b>	<b>Address vehicle is kept</b>		<b>Plate Category</b>	<b>Plate Type</b>	<b>Year Expires</b>

By signing below, I affirm that all the information I have given is true and correct and is in compliance with Alabama Act Number 2011-640. Failure to accurately complete and return this form could result in a felony conviction.

Offender  
Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>Responsible Agency Information</b>	
Agency Name _____	Reporting Officer _____
Agency Address _____	
Phone Number _____	Fax Number _____
Email Address _____	
Officer Signature _____ Date _____	

**Law Enforcement Instructions:**

After verifying the offender information for accuracy and completeness, enter your agency identifying information and return this form along with a current photograph and fingerprints of the offender to:

Alabama Bureau of Investigation  
Sex Offender Registry  
P O Box 1511  
Montgomery AL 36102-1511  
Office: 334-353-1172  
Fax: 334-353-2563